602067

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Dc	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	• • •	ciates, Basilico, Gallagher and Raf	Ta, M.D. P.A			
NAME OF CORPO	602067		• • • • • • • • • • • • • • • • • • • •	_		
DOCUMENT NUM	BER:			_		
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.				
Please return all corre	espondence concerning this matt	ter to the following:				
	Joseph Charles					
Name of Contact Person Radiology Imaging Associates, Basilico, Gallagher and Raffa, M.D P.A.						
Firm/ Company 1825 SE Tiffany Ave, suite 104						
PSL, FL 34952						
City/ State and Zip Code						
eileen.wilson@radnet.com						
	E-mail address: (to be use	ed for future annual report	notification)	_		
For further informati	on concerning this matter, pleas	e call;		-(1) (3)	2022	
Joseph T Charles		772 at (398-2233			
Name	e of Contact Person	Area Cod	ie & Daytime Telephone I	Vumber,	=	(,isemp))
Enclosed is a check for the following amount made payable to the Florida Department of State:				1585E	严	
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	T. L. C. STATE	RM 8: 54	
М	ailing Address	Street A	Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
SMA	The _new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	N/A
	C 28
	TEC 22
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	<u> </u>
	(Fig. 8)
art +1.	/17
(Porta)	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	ent:
I hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations of the position.
•	
Signature of New	Registered Agent, if changing
Check if applicable	N/
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (c), r.s.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change X Add	PDT	Charles, Joseph	1825 SE Tiffany Ave. Sunte 104 PSL, FL.34952
Remove			
2) Change Add X			
Remove 3) Change	POTR	Raffa, Ralph	1825 SE Tiffany Ave. State 104, PSL, FL 3-1952
Add			
Remove 4) Change	sv	Chundi, Vijaya V	1825 SE TiffanyAve, State 104 PSL, Ft 34952
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

. <u>11 AB</u>	ending or adding additional Articles, e	nter enange(s) nere:		
	h additional sheets, if necessary). (Be :	ресіјіс)		
N/A				
				
		·	· · · · · · · · · · · · · · · · · · ·	
				
		1.33		
F If an	amendment provides for an exchange	reclassification, or cance	llation of issued shares.	
pro	visions for implementing the amendme	nt if not contained in the	<u>amendment itself:</u>	
	(if not applicable, indicate N/A)			
N/A				
			··	

9/28/2022

The date of each amendment(s) a	doption:	, if other than the
date this document was signed. 9/28	3/2022	
Effective date if applicable:		
	(no more than 90 days after amendment fi	ile date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requepartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The reach voting group entitled to vote separately on the an	following statement nendment(s):
"The number of votes cas	of for the amendment(s) was/were sufficient for approval	
bv		
, <u>—</u>	(voting group)	
9/28/2022		
Dated		
,		
Signature	See if directors or office	arc have not been
(Bý a	director, president or other officer – if directors or office ted, by an incorporator – if in the hands of a receiver, tru	stee or other court
selec	inted fiduciary by that fiduciary)	
арро	Joseph charles	
	Joseph Charto	
	(Typed or printed name of person signing)	
	PDT	
	(Title of person signing)	